

VEE SUMMARY NO. 8

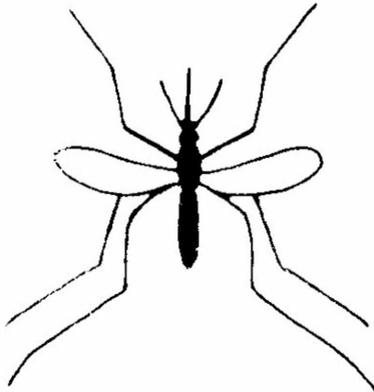
September 1-21, 1972

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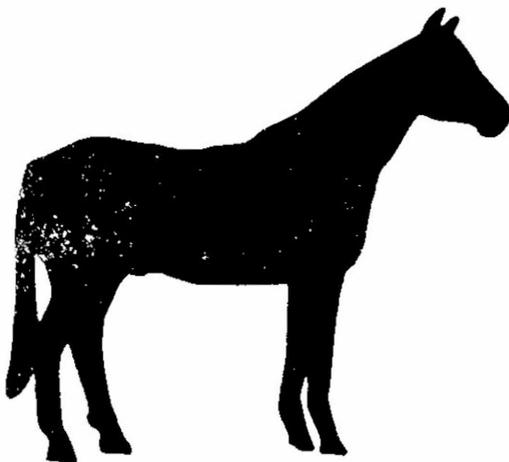
CENTER FOR DISEASE CONTROL

VENEZUELAN EQUINE ENCEPHALITIS

SURVEILLANCE



ZOONOSIS



U. S. DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

PREFACE

Summarized in this report is information received from State Health Departments, university investigators, virology laboratories and other pertinent sources, domestic and foreign. Much of the information is preliminary. It is intended primarily for the use of those with responsibility for disease control activities. Any one desiring to quote this report should contact the original investigator for confirmation and interpretation.

Contributions to the surveillance report are most welcome. Please address to

Center for Disease Control
Attn: Office of Veterinary Public Health Services
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SUGGESTED CITATION

Center for Disease Control: Venezuelan Equine Encephalitis Surveillance
No. 8, Sept. 1-21, 1972, Issued Sept. 1972

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Because of the need to provide information as soon as possible on VEE activity, these surveillance reports will be issued at various intervals--daily, weekly, bi-weekly or monthly--as the urgency of the information demands.

We invite your inquiries or information on VEE and related activities: Center for Disease Control, Office of Veterinary Public Health Services (404) 633-3311, Ext. 3691. Evening or weekend phone numbers:

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I. SUMMARY

As of September 15, 1972, the Venezuelan equine encephalitis (VEE) outbreak in humans and equines in southern Sonora, Mexico, showed signs of being brought under control. There have been no reported equine cases of VEE in the United States to date in 1972. One imported human case was reported in an entomologist returning to California from Mexico in late August 1972. Surveillance activities by a number of cooperating federal, state, and local agencies to monitor possible VEE activity in mosquitoes and equines in the United States are continuing.

II. INTERNATIONAL NOTES

A meeting of the U.S. Mexico Border Public Health Association Binational Health Council was held in Nogales, Arizona, on Monday, September 18, 1972. In attendance were representatives from the Mexican Ministry of Health and Ministry of Agriculture, Sonora State health officials, and United States Department of Agriculture, Center for Disease Control, and local and state health and animal health agencies. Numerous facets of the VEE outbreak in southern Sonora, Mexico, and preventive measures in the United States were discussed, and there did not seem to be any VEE activity in humans and equines north of Hermosillo.

Approximately 50,000 of 55,000 equines in southern Sonora were vaccinated prior to the first reported equine cases, which were noted after heavy rains between August 6-8, 1972. As soon as equine cases appeared a Technical Committee was established for surveillance and all equines were quarantined in the State. Surveillance activities include the weekly collection of data from 16 locations in the southern part of Sonora. Vaccination efforts were intensified and aerial application of ultra low volume Malathion was implemented as far north as Hermosillo, Sonora. By September 15, 1972, approximately 87,914 equines had been vaccinated in the entire State of Sonora. To date 987 dead horses have been reported by local agencies, but not all deaths have been attributed to VEE. There is some indication of equine infectious anemia in the area. Huatabampo reported its first equine cases August 15, 1972, and Guaymas August 22, 1972. The outbreak peaked August 28, 1972, and currently only one to two equine cases are being reported daily. A total of eight suspect human deaths have been reported, four from Navajoa and four from Huatabampo. (Figure 1). At the invitation of the Mexican government, Department of Agriculture observers are currently in Sonora to assist in the study and surveillance of the outbreak. They are collecting insects, wild animals and birds for laboratory examination. The Sonora officials plan to revaccinate the equine population when the horses come out of the mountain pastures next spring. (Source: Dr. J. F. Baker, Jr., Rabies Control Activities, CDC, DHEW, El Paso, Texas)

Fig 1 VEE ACTIVITY, SONORA, MEXICO, 1972



III. STATE ACTIVITIES, VEE SURVEILLANCE, 1972

A. California

No human cases of arbovirus encephalitis acquired in California have been detected as yet this year. However, as reported by Dr. Telford Work, F.C.L., a case of Venezuelan equine encephalitis occurred in an entomologist who was working in southern Sinaloa State, Mexico, and returned to California on August 25, the onset of symptoms. The diagnosis was confirmed by virus isolation and by an antibody titer rise. Dr. Work has isolated at least 24 strains of SLE virus strains of WEE virus, predominantly from C. tarsalis collected in June and in the Imperial Valley.

As of September 8, there were 46 clinically suspect cases of encephalitis in equines reported to the California State Health Department, but none of them have been laboratory confirmed as due to arbovirus infection.

As of September 8, there have been 2,813 pools of mosquitoes and other insects (over 79,736 individual insects) tested by the State Virus Laboratory. There have been 21 isolates of Torlock virus, 28 of SLE virus, 22 of WEE virus, and several unidentified viruses which are none of the commonly expected arboviruses and agents. (Source: California State Department of Public Health: 1972 Arbovirus Encephalitis Surveillance Bulletin - #4, September 8, 1972)

B. Arizona, New Mexico, and Texas

No VEE cases have been reported in Arizona, New Mexico, and Texas, but investigation of sick horses is continuing in these states. Texas reported equine encephalitis investigations were made in August 1972. One virus isolate of western equine encephalomyelitis (WEE) was made, and there is serological evidence that several of the other cases were also WEE. (Reported by Dr. Jack Pitcher, Assistant Veterinarian in Charge, USDA, Austin, Texas; Dr. H. Q. Sibley, LA Secretary, Texas Animal Health Commission, Austin, Texas; Dr. Philip M. Hotel, State Public Health Veterinarian, Arizona Department of Health, Phoenix, Arizona; and Dr. Nancy C. McCaig, State Epidemiologist, New Mexico Health and Social Services Department, Santa Fe, New Mexico)

Montana

There have been 42 cumulative equine encephalitis investigations in Montana during year. WEE has been isolated from one case and 26 other cases have had a compatible with the clinical diagnosis of WEE. The advent of snow flurries an end to the mosquito season in that part of the United States this year. (Dr. W. E. Ivey, Veterinarian in Charge, USDA, Helena, Montana)

FEDERAL ACTIVITIES

Through June 1972, USDA reports a total of 141,589 equine VEE vaccinations in the United States. Table 1 shows the number of doses administered by state. Those not listed made no reports. (Source: Foreign Animal Diseases Report, August Emergency Programs, Veterinary Services, APHIS, USDA, Hyattsville, Maryland)

TABLE 1
REPORTED CUMULATIVE VEE VACCINATIONS,* UNITED STATES

Alabama	37	Missouri	6
Alaska	0	Montana	2
Arizona	32	Nebraska	4173
Arkansas	117	Nevada	3135
California	1137	New York	59040
Colorado	6440	North Carolina	17
Connecticut	3838	North Dakota	204
Delaware	97	Oklahoma	356
Florida	1813	Oregon	4128
Georgia	230	Pennsylvania	3108
Hawaii	8	South Carolina	97
Idaho	2379	South Dakota	267
Indiana	3251	Tennessee	142
Iowa	6	Texas	13289
Kansas	679	Utah	6159
Kentucky	397	Vermont	4196
Louisiana	352	Virginia	335
Maryland	329	Washington	2565
Massachusetts	340	West Virginia	225
Michigan	6303	Wisconsin	6734
Minnesota	2909	Wyoming	2676
Mississippi	1		

TOTAL 141,589

*With Commercial Vaccine Through 1972

**STATE EPIDEMIOLOGISTS AND
STATE PUBLIC HEALTH VETERINARIANS**

Key to all disease surveillance activities are the State Epidemiologists, who are responsible for collecting, interpreting, and transmitting data and epidemiologic information from their individual States. Their contributions to this report are gratefully acknowledged. In addition, valuable contributions to zoonoses surveillance reports are made by State Public Health Veterinarians.

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*Dual assignment